

Work Order ID 92377

92377

Page 1

October-30-12 9:24:22 AM

Item ID: D4098-041

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Armrest Cushion Assembly

Start Date: 10/23/12 Start Qty: 6.00

6

Cust Item ID:

Required Date: 11/09/12 Req'd Qty: 6.00

6

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 12-10-30 Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D4098	A

100 0.00

100

Purchasing

Memo

0.00

Purchasing

Issue P/O: 18301
Ship with D4099-3 Bracket
Manufacture as per dwg D4098
Possible Supplier: AEROTEX INTERIORS INC.
Material release note is required

12-10-01

110

Receive & Inspect for Damage & Mat'l Certs 0.00

110

Packaging

Memo

0.00

Packaging

12/11/16 (6)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector ~																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
Material <input type="checkbox"/>																											
Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 92377

October-30-12 9:24:22 AM

92377

Page 2

Item ID: D4098-041

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Armrest Cushion Assembly

Start Date: 10/23/12 Start Qty: 6.00

6

Cust Item ID:

Required Date: 11/09/12 Req'd Qty: 6.00

6

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	QC6- Inspect dimensions to drawing	0.00				6			
120									
QC	Memo	0.00							
Quality Control									
124		0.00							
124									
Small Fab	Memo	0.00							
Small Fab	1- Locate and remove fabric from hole as per dwg								
126	QC5- Inspect part completeness to step on W/O	0.00							
126									
QC	Memo	0.00							
Quality Control									

DAS
15
2-88

12/11/19

DAS
16
9-88

12/11/16

N/A CA 12/12/11

hole done @
Acotex

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 92377

October-30-12 9:24:22 AM

92377

Page 3

Item ID: D4098-041 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Armrest Cushion Assembly
 Start Date: 10/23/12 Start Qty: 6.00 ***6*** Cust Item ID:
 Required Date: 11/09/12 Req'd Qty: 6.00 ***6*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: _____	0.00							
130									
Packaging	Memo 188	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

ME
12-12-11

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Doc/Data <input type="checkbox"/>											
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Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
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FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

October-30-12 9:24:22 AM

Page 1

Work Order ID: 92377

Parent Item: D4098-041

Parent Item Name: Armrest Cushion Assembly

Start Date: 10/23/12

Required Date: 11/09/12

Start Qty: 6.00

Required Qty: 6.00

Comments: IPP Rev:A as per ECN10-573 DD 10.05.18 verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4098-041P Armrest Cushion Assembly		Manufactured	No			110	Each	4.0000	1	6		10/24/12 (E)	
				<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
				ST		4							
				87900		4							
D4099-3 Bracket		Manufactured	No			100	Each	6.0000	1	6		08/12/11/05	
				<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
				ST246b		4							
				88853		4							
				ST247A		2							
				88618		2							

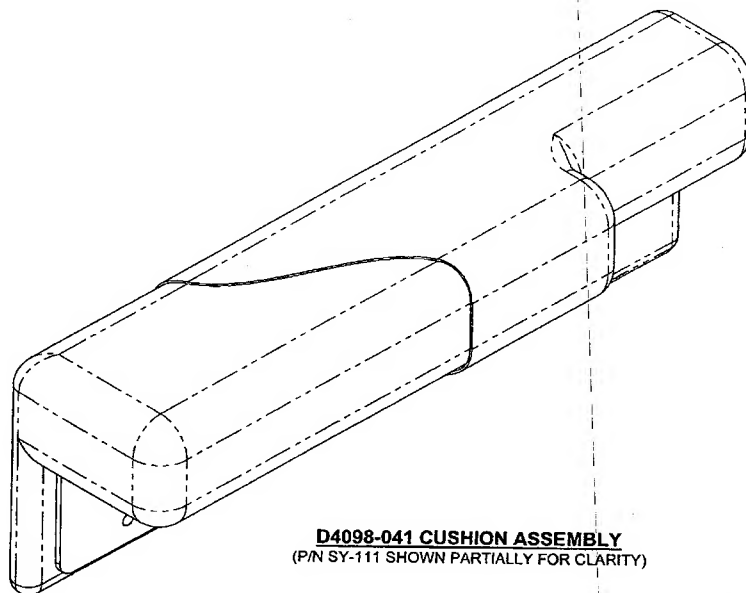
NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

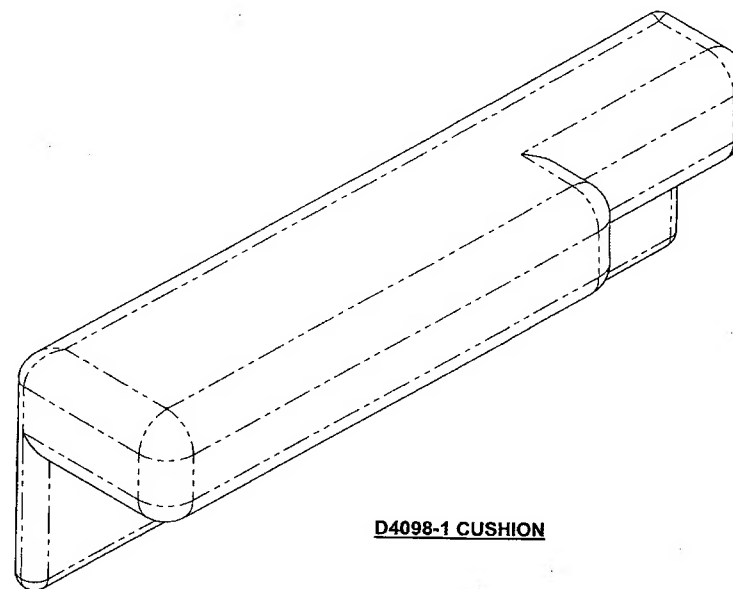
DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
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Unapproved <input type="checkbox"/>																											
FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																		



D4098-041 CUSHION ASSEMBLY
(P/N SY-111 SHOWN PARTIALLY FOR CLARITY)



D4098-1 CUSHION

SHOWN
REF. TO
ENGINEERING
UNCONTROLLED
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER

NO. 92377 MJS
12-10-30

RELEASED
2010-05-17
ms

A	NEW ISSUE	MB	10.05.05
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	10.05.05		

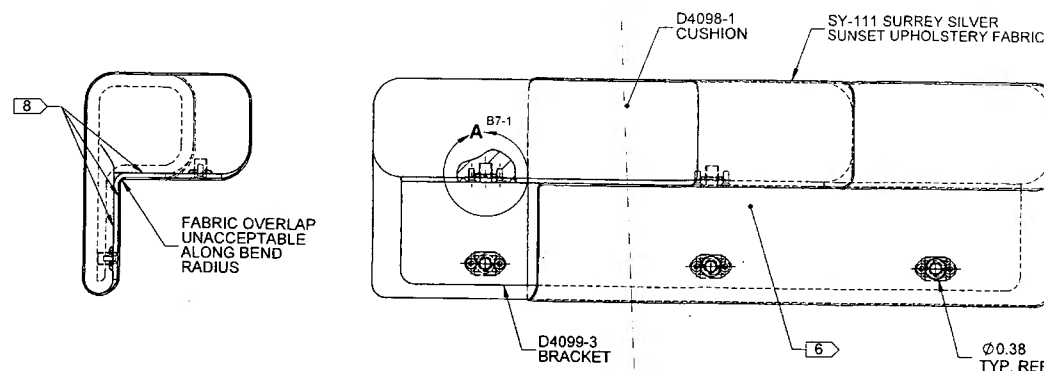
DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D4098** REV. A
TITLE **CUSHION ASSEMBLY** SCALE NTS
SHEET 1 OF 3

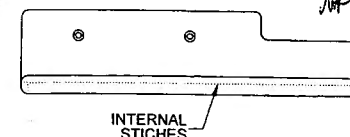
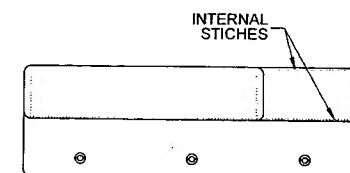
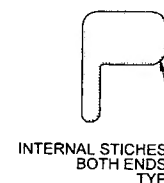
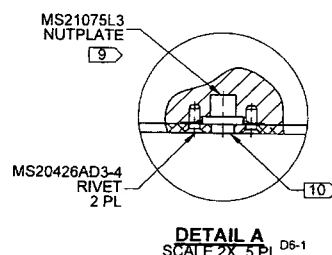
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WRITTEN PERMISSION FROM DART AEROSPACE LTD

92377

ITEM	QTY -041	P/N	DESCRIPTION
1	X	D4098-041	CUSHION ASSEMBLY
2	1	D4098-1	CUSHION
3	1	D4099-3	BRACKET
4	A/R	1300/1300L	3M SCOTCH-GRIP ADHESIVE
5	5	MS21075L3	NUT PLATE
6	10	MS20426AD3-4	RIVET
7	A/R	SY-111	SURREY SILVER SUNSET UPHOLSTERY FABRIC



D4098-041 CUSHION ASSEMBLY
(P/N SY-111 SHOWN PARTIALLY FOR CLARITY)



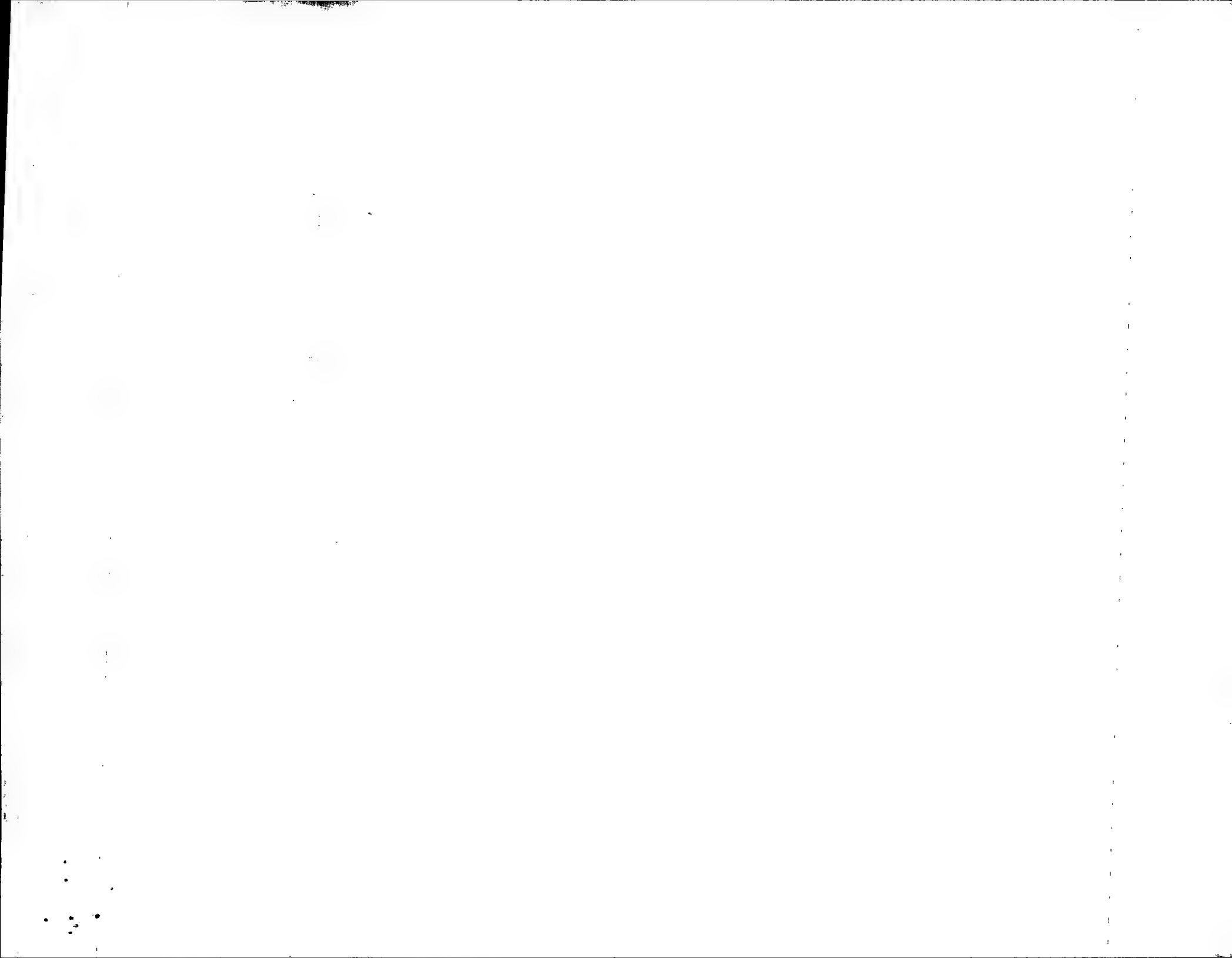
RELEASED
2010-05-17

D4098-041 CUSHION ASSEMBLY
STITCHING PATTERN

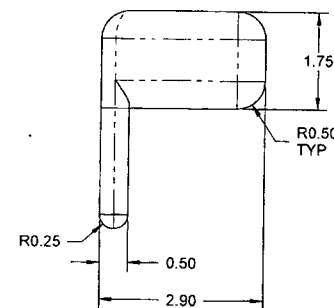
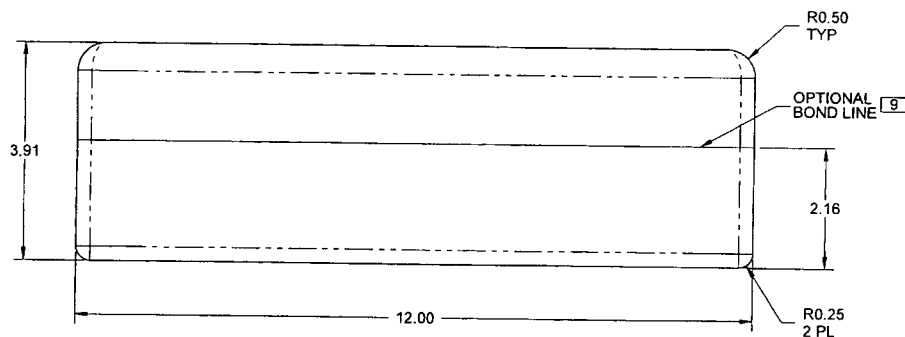
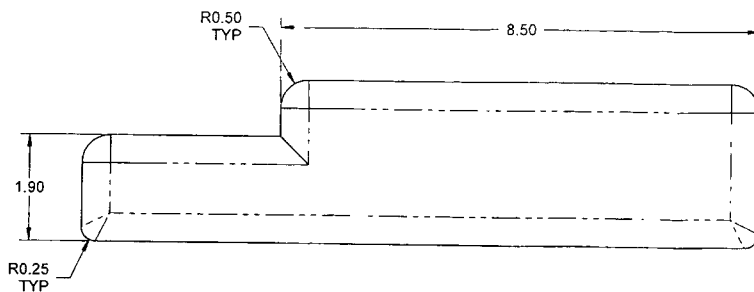
D4098-041 NOTES:

- 1) MATERIAL: COVER D4098-1/D4099-3 ASSEMBLY WITH SURREY SILVER SUNSET UPHOLSTERY FABRIC P/N SY-111. BOND FABRIC TO D4099-3 USING 3M 1300/1300L ADHESIVE (0.002" TO 0.010" THICK) IN ACCORDANCE WITH MANUFACTURER'S INSTRUCTIONS. THREAD: MIL-VT-295 TYPE II CLASS A, GREY NYLON THREAD, 4-6 STITCHES PER INCH, USE 1/2" MIN BACKSTITCH, NO LOOSE THREADS
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D4098-041" USING FINE POINT PERMANENT INK MARKER
- 7) WEIGHT: 0.69 lbs
- 8) BOND D4098-1 CUSHION TO D4099-3 BRACKET USING 3M 1300/1300L ADHESIVE (0.002" TO 0.010" THICK) IN ACCORDANCE WITH MANUFACTURER'S INSTRUCTIONS
- 9) IT IS ACCEPTABLE TO RELIEVE D4098-1 CUSHION WHERE THE NUTPLATES ARE LOCATED TO ENSURE PROPER CONTACT WITH D4099-3 BRACKET
- 10) HOLES MUST BE FREE OF ADHESIVE AND FABRIC

DESIGN	16	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	16		
CHECKED	16	DRAWING NO.	REV. A
MFG. APPR.	16	D4098	SHEET 2 OF 3
APPROVED	16	TITLE	SCALE
DE APPR.	16	CUSHION ASSEMBLY	NTS
DATE	10.05.05	COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMPILED OR CONSIDERED TO BE IN ANY OTHER MANNER WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	



92377



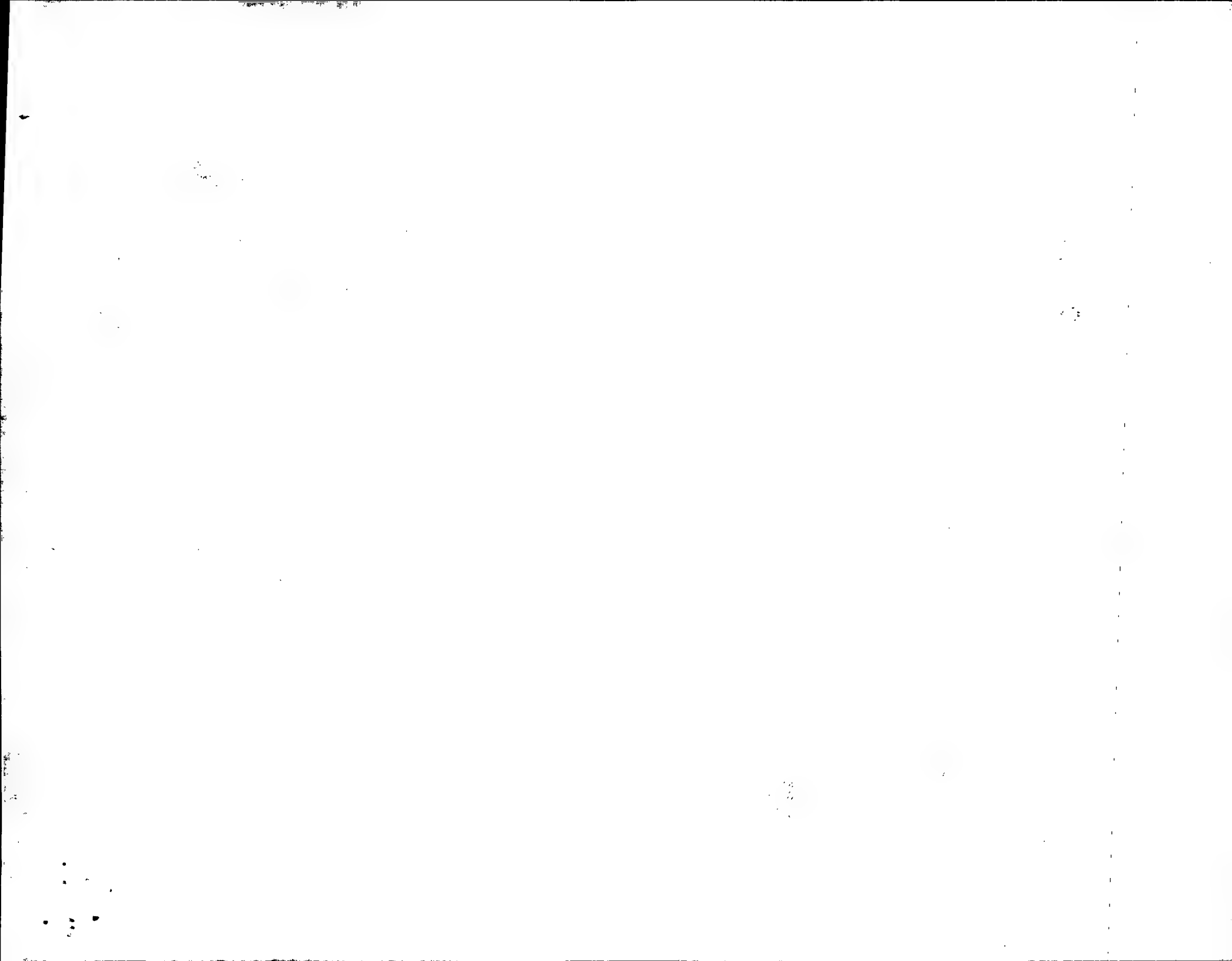
D4098-1 CUSHION

RELEASED
2010-05-17

D4098-1 NOTES:

- 1) MATERIAL: SKANDIA HR150 POLYFOAM (4.6 LBS/CU FT)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES N/A
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.37 lbs
- 8) POSSIBLE SUPPLIER: AEROTEX INTERIORS INC.
- 9) CUSHION MAY BE ASSEMBLED BY BONDING A 1.75" PIECE OF FOAM TO A 2.13" PIECE OF FOAM AS SHOWN ABOVE USING 3M 1300/1300L SCOTCH-GRIP ADHESIVE (0.002" TO 0.010" THICK) IN ACCORDANCE WITH MANUFACTURER'S INSTRUCTIONS

DESIGN	JA	DART AEROSPACE LTD	
DRAWN	JA	HAWKESBURY, ONTARIO, CANADA	
CHECKED	JP	DRAWING NO.	REV. A
MFG. APPR.	JP	D4098	SHEET 3 OF 3
APPROVED	JP	TITLE	SCALE
DE APPR.	JP	CUSHION ASSEMBLY	NTS
DATE	10.05.05	<small>COPYRIGHT © 2010 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	





Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO18301

Purchase Order Date 11/1/2012

PO Print Date 11/1/2012

Page Number 1 of 1

Order From :

VC-AER003

AEROTEX INTERIORS INC.
2340 PEGASUS WAY NE
UNIT 151
CALGARY, AB T2E 8M5
CA

Contact Name

Vendor Phone 403 295 8770

Vendor Fax 403 313 0793

Vendor Account Nbr

Buyer

Brigitte Golden

Requisition Nbr

Tax Resale Nbr 10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	D4098-041P	Armrest Cushion Assembly	11/9/2012 Yes	6.00 Each	FedEx Overmigh	\$191.9683	\$1,151.81

Special Inst: AS PER DWG: D4098 REV: A
B92377

PO Total:

\$1,151.81

CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY

Change Nbr: 1

Change Date: 11/1/2012

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required. YES NO



151-2340 Pegasus Way NE
Calgary, AB T2E 8M5
PH: 403.295.8770 FX: 403.313.0793
EM: info@aerotex.ca WS: www.aerotex.ca

Packing Slip

Date Packing Slip#

02/11/2012 12-0158

Ship: Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
CANADA

Customer Phone
613.632.5200

Customer Fax
613.632.1053

Ship Via
FEDEX P1

Courier Acct No.
151793240

Bill: Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, Ontario K6A 1K7
CANADA

Email: PURO ACCT 1-7684382

Ship Date P.O. No.

02/11/2012

PO18301

Aircraft	Description	Part Number	Back Order	Shipped	Qty
DART	Armrest Cushion Assembly	D4098-041P			6
	GST On Sales				

Thank you for doing business with Aerotex Interiors!

GST/HST No. 139110308

"your one stop shop for all your aircraft interior needs"
www.aerotex.ca

1. Organization issuing certificate.

Aerotex Interiors Inc.,
24 – 2333 18 Ave NE
Calgary, AB T2E 8T6

2.

CERTIFICATE OF CONFORMANCE

3. Work Order / Contract / Invoice

12-0158

4. Customer Name/Address

DART Aerospace LTD
1270 Aberdeen
Hawkesbury, ON K6A 1K7
CANADA

5. Purchase Order

18301

6. Unit	7. Materials Used for Items	8. Specifications	9. Batch	10. Item	11. Part Number	12. Quantity	13. Status
1	FOAM – HR Polyurethane 150 ILD	HR 150	5033	Armrest Cushion Assembly	D4098-041P	6	NEW
2	FABRIC – Surrey Silver	Surrey Silver	4935				

14. Remarks

I certify that the materials supplied for the Purchase/Repair Order listed above conform to Aerotex Interiors's material/process specification and are in all respects in conformance with the contract requirements. I further certify that items have been fabricated to established specification to confirm with DWG. NO. D4098

15. Signature

16. Title

Manager

17. Name

18. Date

Carson Chanthvong

November 13, 2012

1. Organization issuing certificate Aerotex Interiors Inc., 24 – 2333 18 Ave NE Calgary, AB T2E 8T6		2. <div style="text-align: center; font-size: 24pt; font-weight: bold;"> CERTIFICATE OF CONFORMANCE </div>				3. Work Order / Contract / Invoice 12-0158	
4. Customer Name/Address DART Aerospace LTD 1270 Aberdeen Hawkesbury, ON K6A 1K7 CANADA						5. Purchase Order 18301	
6. Unit	7. Materials Used for Items	8. Specifications	9. Batch	10. Item	11. Part Number	12. Quantity	13. Status
1	FOAM – HR Polyurethane 150 ILD	HR 150	5033	Armrest Cushion Assembly	D4098-041P	6	NEW
2	FABRIC – Surrey Silver	Surrey Silver	4935				
3	THREAD – Grey Nylon	MIL-VT-295 TYPE II CLASS A	4822				
14. Remarks <p>I certify that the materials supplied for the Purchase/Repair Order listed above conform to Aerotex Interiors's material/process specification and are in all respects in conformance with the contract requirements. I further certify that items have been fabricated to established specification to confirm with DWG. NO. D4098</p>							
15. Signature  				16. Title QC Manager			
17. Name Mike Djan				18. Date November 26, 2012			